

Complete Summary

TITLE

Lipid management in adults: percentage of patients with diagnosed coronary heart disease (CHD) or equivalent who have low-density lipoprotein (LDL)-cholesterol less than 100 mg/dL.

SOURCE(S)

Institute for Clinical Systems Improvement (ICSI). Lipid management in adults. Bloomington (MN): Institute for Clinical Systems Improvement (ICSI); 2003 Jul. 72 p. [109 references]

Brief Abstract

DESCRIPTION

This measure assesses the percentage of patients with diagnosed coronary heart disease (CHD) or equivalent who have low-density lipoprotein (LDL)-cholesterol less than 100 mg/dL.

RATIONALE

The priority aim addressed by this measure is to improve the percentage of patients with known coronary heart disease (CHD) or equivalent with lipid disorders who meet their treatment goal.

PRIMARY CLINICAL COMPONENT

Coronary heart disease (CHD); coronary bypass; angioplasty; low-density lipoprotein (LDL)-cholesterol

DENOMINATOR DESCRIPTION

Number of patients with diagnosed heart disease (see the related "Denominator Inclusions/Exclusions" field in the Complete Summary)

NUMERATOR DESCRIPTION

Number of patients with coronary heart disease (CHD) or equivalent with low-density lipoprotein (LDL)-cholesterol less than 100 mg/dL (see the related "Numerator Inclusions/Exclusions" field in the Complete Summary)

Evidence Supporting the Measure

PRIMARY MEASURE DOMAIN

Outcome

SECONDARY MEASURE DOMAIN

Not applicable

EVIDENCE SUPPORTING THE MEASURE

A clinical practice guideline or other peer-reviewed synthesis of the clinical evidence

NATIONAL GUIDELINE CLEARINGHOUSE LINK

- [Lipid management in adults.](#)

Evidence Supporting Need for the Measure

NEED FOR THE MEASURE

Unspecified

State of Use of the Measure

STATE OF USE

Current routine use

CURRENT USE

Internal quality improvement

Application of Measure in its Current Use

CARE SETTING

Physician Group Practices/Clinics

PROFESSIONALS RESPONSIBLE FOR HEALTH CARE

Physicians

LOWEST LEVEL OF HEALTH CARE DELIVERY ADDRESSED

Group Clinical Practices

TARGET POPULATION AGE

Age 20 to 75 years

TARGET POPULATION GENDER

Either male or female

STRATIFICATION BY VULNERABLE POPULATIONS

Unspecified

Characteristics of the Primary Clinical Component

INCIDENCE/PREVALENCE

See "Burden of Illness" field.

ASSOCIATION WITH VULNERABLE POPULATIONS

Unspecified

BURDEN OF ILLNESS

Heterozygous familial hypercholesterolemia affects 1 in 500 persons in the United States with the risk of death from coronary artery disease increased almost four fold between the ages of 20 and 74. (Myocardial infarction leading to sudden death often occurs in these men in their 30's or 40's, and by age 50, 80 percent of males have ischemic heart disease.) Without intervention, approximately 50-75 percent of men with heterozygous familial hypercholesterolemia will have a myocardial infarction by age 60. Thompson showed the prevalence of coronary disease in men at age 35 equalled that in women at age 40 in contrast to the typical 10 year lag between men and women (Thompson, et al. Arteriosclerosis, 1989).

EVIDENCE FOR BURDEN OF ILLNESS

Institute for Clinical Systems Improvement (ICSI). Lipid management in adults. Bloomington (MN): Institute for Clinical Systems Improvement (ICSI); 2003 Jul. 72 p. [109 references]

UTILIZATION

Unspecified

COSTS

Unspecified

Institute of Medicine National Healthcare Quality Report Categories

IOM CARE NEED

Living with Illness

IOM DOMAIN

Effectiveness

Data Collection for the Measure

CASE FINDING

Users of care only

DESCRIPTION OF CASE FINDING

All patients age 20 to 75 with diagnosed heart disease

The preferred way to collect these data:

1. All patients 20 to 75 years old with diagnosed coronary heart disease (CHD) or equivalent could be identified. Each medical group would select at random 20 patients off this list for measurement each month.
2. Medical records or computerized laboratory records of these 20 patients may be reviewed to ascertain the lowest low-density lipoprotein (LDL)-cholesterol value in the previous 12 months.

An alternative way to collect the data if automated databases are not available for all patients to be measured:

1. All patients 20 to 75 years old with diagnosed heart disease in the previous 12 months would be identified at the medical group using International Classification of Diseases, Ninth Revision (ICD-9) diagnostic codes from the previous 12 months. Each medical group would select at random 20 patients off this list for measurement each month.
2. Medical records or computerized laboratory records of these 20 patients would be reviewed to ascertain the lowest LDL-cholesterol value in the previous 12 months.

Data on 20 patients are collected monthly and reported quarterly.

DENOMINATOR SAMPLING FRAME

Patients associated with provider

DENOMINATOR (INDEX) EVENT

Clinical Condition

DENOMINATOR INCLUSIONS/EXCLUSIONS

Inclusions

Number of patients with diagnosed heart disease*

*Patients 20 to 75 years old with coronary heart disease (CHD) or equivalent include all those who received one or more of the following International Classification of Diseases, Ninth Revision (ICD-9) codes in the previous 12 months: 410 to 414.9, V45.81 (coronary bypass), or V45.82 (angioplasty). Even if a patient has never been diagnosed with a lipid disorder, and/or is not on lipid lowering treatment, they may be included if they are 20 to 75 years old and have diagnosed heart disease.

Exclusions

Unspecified

NUMERATOR INCLUSIONS/EXCLUSIONS

Inclusions

Number of patients with coronary heart disease (CHD) or equivalent with low-density lipoprotein (LDL)-cholesterol <100 mg/dL.*

*The patient is classified as having met the treatment goal of LDL-cholesterol <100 mg/dL if the patient had at least one LDL-cholesterol test of <100 mg/dL in the previous 12 months.

If no LDL-cholesterol test was done in the past 12 months, the patient is classified as NOT having met the lipid treatment goal of <100 mg/dL.

If no LDL-cholesterol value in the previous 12 months is <100 mg/dL, the patient is classified as NOT having met the lipid treatment goal of <100 mg/dL.

If any LDL-cholesterol value in the previous 12 months is <100 mg/dL, the patient is classified as HAVING MET the lipid treatment goal of <100 mg/dL.

Exclusions

Unspecified

DENOMINATOR TIME WINDOW

Time window is a fixed period of time

NUMERATOR TIME WINDOW

Fixed time period

DATA SOURCE

Administrative data

Laboratory data

Medical record

LEVEL OF DETERMINATION OF QUALITY

Individual Case

OUTCOME TYPE

Clinical Outcome

PRE-EXISTING INSTRUMENT USED

Unspecified

Computation of the Measure

SCORING

Rate

INTERPRETATION OF SCORE

Better quality is associated with a higher score

ALLOWANCE FOR PATIENT FACTORS

Unspecified

STANDARD OF COMPARISON

Internal time comparison

Evaluation of Measure Properties

EXTENT OF MEASURE TESTING

Unspecified

Identifying Information

ORIGINAL TITLE

Percentage of patients with diagnosed CHD or equivalent who have LDL-cholesterol less than 100 mg/dL.

MEASURE COLLECTION

[Lipid Management in Adults Measures](#)

DEVELOPER

Institute for Clinical Systems Improvement

ADAPTATION

Measure was not adapted from another source.

RELEASE DATE

2003 Jul

MEASURE STATUS

This is the current release of the measure.

SOURCE(S)

Institute for Clinical Systems Improvement (ICSI). Lipid management in adults. Bloomington (MN): Institute for Clinical Systems Improvement (ICSI); 2003 Jul. 72 p. [109 references]

MEASURE AVAILABILITY

The individual measure, "Percentage of patients with diagnosed CHD or equivalent who have LDL-cholesterol less than 100 mg/dL," is published in "Health Care Guideline: Lipid Management in Adults." This document is available from the [Institute for Clinical Systems Improvement \(ICSI\) Web site](#).

For more information, contact ICSI at, 8009 34th Avenue South, Suite 1200, Bloomington, MN 55425; phone: 952-814-7060; fax: 952-858-9675; Web site: www.icsi.org; e-mail: icsi.info@icsi.org.

NQMC STATUS

This NQMC summary was completed by ECRI on April 28, 2004.

COPYRIGHT STATEMENT

This NQMC summary (abstracted Institute for Clinical Systems Improvement [ICSI] Measure) is based on the original measure, which is subject to the measure developer's copyright restrictions.

The abstracted ICSI Measures contained in this Web site may be downloaded by any individual or organization. If the abstracted ICSI Measures are downloaded by an individual, the individual may not distribute copies to third parties.

If the abstracted ICSI Measures are downloaded by an organization, copies may be distributed to the organization's employees but may not be distributed outside of the organization without the prior written consent of the Institute for Clinical Systems Improvement, Inc.

All other copyright rights in the abstracted ICSI Measures are reserved by the Institute for Clinical Systems Improvement, Inc. The Institute for Clinical Systems

Improvement, Inc. assumes no liability for any adaptations or revisions or modifications made to the abstracts of the ICSI Measures.

© 2004 National Quality Measures Clearinghouse

Date Modified: 11/1/2004

The logo for FIRSTGOV, with "FIRST" in blue and "GOV" in red, and a small red star above the "I".

